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FROM: Marcia A. Shutts

DATE: August 20, 2004

PHONE: (816) 292-8301

FILE NO.: 5009909-6

RE: Application No. 09/693,605
Filed: October 20, 2000
Inventor: Ashraf MADOUKH

Total number of pages including this page: 3
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MESSAGE

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PTO/SB/21 (02-04)

Approved for use through 07/31/2006. OMB 0851-0031

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FORM**

(to be used for all correspondence after initial filing)

Application Number	09/693,605
Filing Date	October 20, 2000
First Named Inventor	MADOUKH, Ashraf
Art Unit	2131
Examiner Name	not yet known
Attorney Docket Number	5009909-6

Total Number of Pages in This Submission

2

ENCLOSURES (Check all that apply)

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|--|--|---|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance communication to Technology Center (TC) |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Terminal Disclaimer | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
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| <input type="checkbox"/> Certified Copy of Priority Document(s) | Remarks | |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application | Applicant requests the Patent Office to change the Attorney Docket No. to 5009909-6 | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENTFirm
or
Individual name

Kyle L. Elliott

Signature

Date

8-20-04

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Marcia Shutts

Signature

Marcia A. Shutts

Date

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Application Number	09/693,605
Filing Date	October 20, 2000
First Named Inventor	MADOUKH, Ashraf
Art Unit	2131
Examiner Name	Gilberto BARRON Jr.
Attorney Docket Number	5008909-6

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I hereby revoke all previous powers of attorney given in the above-identified application.

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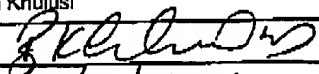
<input type="checkbox"/> Firm or Individual Name	Spencer Fane Britt & Browne				
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City	Kansas City	State	MO	Zip	64106
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Telephone	816-474-8100	Fax	816-474-3218		

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Bassam Khulusi		
Signature			
Date	6/14/2004	Telephone	913-310-0888

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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